

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number KSD007246840		2. Page 1 of 1		3. Emergency Response Phone (800) 483-3718		4. Manifest Tracking Number <b>008037605 FLE</b>				
		5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 Generator's Phone: (316) 265-7400		Generator's Site Address (if different than mailing address) SAME								
6. Transporter 1 Company Name U.S. Bulk Transportation Inc.		U.S. EPA ID Number PA987347515										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address Clean Harbors Lone Mountain LLC 40355 S County Road 236 Wavoka, OK 73860 Facility's Phone: (580) 697-3500		U.S. EPA ID Number OKD065438376										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No.	Type					
	x	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S. (F001, F003), 9, PG III				1	DT	16	Y	F001	F002	F003
										F004	F005	
14. Special Handling Instructions and Additional Information 1. CH891502X05 ERG#171  TR # 386-2 TL # 386-47												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Offor's Printed/Typed Name S. M. Tyson												
Signature Jim Tyson												
Month Day Year 2 15 15												
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:											
	Transporter signature (for exports only):											
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name Todd Benner											
Signature Todd Benner												
Month Day Year 2 15 15												
Transporter 2 Printed/Typed Name												
Signature												
Month Day Year												
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number:											
	18b. Alternate Facility (or Generator) U.S. EPA ID Number											
	Facility's Phone:											
18c. Signature of Alternate Facility (or Generator)												
Month Day Year												
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1. 1132 2. 3. 4.												
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name												
Signature												
Month Day Year												

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number K50007246846	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number <b>008037605 FLE</b>	
5. Generator's Name and Mailing Address <b>Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219</b>			Generator's Site Address (if different than mailing address) <b>SAME</b>			
Generator's Phone: <b>(316) 269-7400</b>						
6. Transporter 1 Company Name <b>US Bulk Transportation Inc</b>			U.S. EPA ID Number <b>PA987347515</b>			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Clean Harbors Lone Mountain LLC 40365 S County Road 236 Wynoka, OK 73860</b>			U.S. EPA ID Number <b>OKD065438376</b>			
Facility's Phone: <b>(580) 697-3500</b>						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
	X	1. <b>HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (F001, F003), 9, PG III</b>	1	DT	EST 16	Y
		2.				
		3.				
		4.				
13. Waste Codes						
					F001	F002
					F003	F004
					F005	
14. Special Handling Instructions and Additional Information <b>1. CH831502X08 ERG#171</b>  <b>TR# 386-2 TL# 386-47</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name <b>Jim Tyson</b>			Signature <i>Jim Tyson</i>		Month <b>2</b>	Day <b>15</b>
					Year <b>15</b>	
TRANSPORTER	16. International Shipment <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____			
	Transporter signature (for exports only):		Date leaving U.S.: _____			
	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name <b>Tom Brauer</b>		Signature <i>Tom Brauer</i>		Month <b>02</b>	Day <b>03</b>
	Transporter 2 Printed/Typed Name		Signature		Year <b>15</b>	
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number: _____					
	18b. Alternate Facility (or Generator) U.S. EPA ID Number					
	Facility's Phone: _____					
	18c. Signature of Alternate Facility (or Generator)					
	Month _____ Day _____ Year _____					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. <b>H132</b>	2.	3.	4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <b>David...</b>			Signature <i>David...</i>		Month <b>10</b>	Day <b>15</b>
					Year <b>15</b>	